



POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	71058	7-31-99
O.I.P.E. CLASSIFIER	DN	32	8/5
FORMALITY REVIEW		65372	8-17-99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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2	✓
3	✓
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If more than 150 claims or 10 actions  
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